GREATER PROVIDENCE CHAPTER.
FOR RETARDED CITIZENS, INC.
(JOHN E. FOGARTY CENTER)
REPORT ON CONTRACT COMPLIANCE
CALENDAR YEAR 1999

DEPARTMENT OF ADMINISTRATION
BUREAU OF AUDITS
ONE CAPITOL HILL
PROVIDENCE, RI 02908-5889



Department of Administration BUREAU OF AUDITS One Capitol Hill Providence, R.I. 02908-5889

TEL #: (401) 222-2768 FAX #: (401) 222-3973

Greater Providence Chapter for Retarded Citizens, Inc.

(John E. Fogarty Center)

REPORT ON CONTRACT COMPLIANCE

Calendar Year 1999

EXECUTIVE SUMMARY

The prior audit report for the Greater Providence Chapter for Retarded Citizens, Inc. issued April 15, 1998 by the Bureau of Audits, cited two recommendations that have been implemented.

Based on our contract compliance engagement for the calendar years 1994 through 1999, we determined the following:

- 1. A net settlement of \$24,642 is due to the Department of Human Services from the provider as a result of excess per diem rates, for the period under review.
- 2. There were net excess funds of \$4,092 in the Provider's Day, Waiver, and Semi-Independent Residential Programs that should be recovered by the Department of Mental Health, Retardation and Hospitals or reprogrammed in accordance with applicable contract provisions and policy.

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Department of Administration BUREAU OF AUDITS One Capitol Hill Providence, R.I. 02908-5889

TDD #: 222-2726 FAX #: 222-3973

May 2, 2001

Ms. Christine Ferguson, Director Department of Human Services 600 New London Avenue Cranston, RI 02920

Dear Ms. Ferguson:

We have examined the cost report submitted by the Greater Providence Chapter for Retarded Citizens, Inc. (John E. Fogarty Center) for the calendar year 1999. We audited the most current year and reviewed the cost reports for 1994 through 1998 to settle those years for the following DHS Funded Intermediate Care Facilities for the Mentally Retarded (ICF/MR):

Facility	<u>License Numbe</u>
Scenic Hill Group Home	53
Roland Street Group Home	132
Douglas Avenue Group Home	235

The findings and recommendations included herein have been discussed with management and we have considered their comments in the preparation of our report. Section 35-7-4 of the R.I. General Laws requires the director of the department audited to respond in writing within 60 days to all recommendations made by the Bureau of Audits. A copy of your reply should also be sent directly to Robert L. Carl, Jr., Ph.D., Director, Department of Administration; Honorable Antonio J. Pires, Chairman of the House Finance Committee; and to the Honorable Frank T. Caprio, Chairman of the Senate Finance Committee.

We wish to express our appreciation to the officials of the Department of Human Services and to the director and staff members of the Greater Providence Chapter for Retarded Citizens, Inc. (John E. Fogarty Center), for their assistance and cooperation during the course of this engagement.

Sincerely,

Stephen M. Cooper, CFE, CGFM

Chief, Bureau of Audits

SMC:pb



Department of Administration BUREAU OF AUDITS One Capitol Hill Providence, R.I. 02908-5889

TDD #: 222-2726 FAX #: 222-3973

May 2, 2001

Ms. A. Kathryn Power, Director Department of Mental Health, Retardation and Hospitals 600 New London Avenue Cranston, RI 02920

Dear Ms. Power:

We have examined the cost report submitted for Greater Providence Chapter for Retarded Citizens, Inc. (John E. Fogarty Center), for the following MHRH funded programs for the calendar year 1999:

Programs

Adult Day Programs
Conversion Waiver Program
Residential Waiver Program
Semi-Independent Residential Programs

The report contained herein represents the consolidation and field audit revision report approved by your department to provide for greater and more timely audit coverage to your providers. This audit is based on the most recent year audited. For settlement purposes this report includes calendar years 1994 through 1998.

The findings and recommendations included herein have been discussed with management and we have considered their comments in the preparation of our report. Section 35-7-4 of the R.I. General Laws requires the director of the department audited to respond in writing within 60 days to all recommendations made by the Bureau of Audits. A copy of your reply should also be sent directly to Robert L. Carl, Jr., Ph.D., Director, Department of Administration; Honorable Antonio J. Pires, Chairman of the House Finance Committee; and to the Honorable Frank T. Caprio, Chairman of the Senate Finance Committee.

We wish to express our appreciation to the officials of the Department of Mental Health, Retardation and Hospitals (MHRH) and to the director and staff members of the Greater Providence Chapter for Retarded Citizens, Inc. (John E. Fogarty Center), for their assistance and cooperation during the course of this engagement.

Sincerely,

Stephen M. Cooper, Chief

Bureau of Audits

SMC:pb

SCOPE AND PURPOSE

The purpose of this engagement was to audit the most current year cost report (1999) submitted by the provider for services funded by the Department of Human Services and the Department of Mental Health, Retardation and Hospitals and make settlements for that year and also make settlements for all prior unaudited years. The review of prior unaudited years (1994-1998) was limited to reviewing selected accounts and making adjustments based on risk factors developed through the testing of the current year accounts, the prior field audit, prior year cost reports and sampling.

By funding source the purpose of this audit was to determine:

DHS Programs

- whether expenses were allowable in accordance with the principles of reimbursement.
- through the verification of census records the total client days used in calculating audited per diem rates.
- any over or under funding on behalf of the Department of Human Services.
- if the clients' clothing funds, and client wages were properly maintained in accordance with the prescribed guidelines.

MHRH Programs

- whether expenses reported per the cost reports were in accordance with the terms of the contracts.
- whether revenues were reported accurately on the cost reports.
- any over or under funding on behalf of the Department of Mental Health, Retardation and Hospitals.

Our audit of DHS programs was made in accordance with the "Federal Medicare Principles of Reimbursement" issued by the Social Security Administration, Bureau of Health Insurance HIM-15 adopted by the State of Rhode Island with the exclusion of return of net equity and the approved providers' operating budgets.

Additionally, we have audited the Clients' Clothing Account Funds in accordance with the "Principles for Skilled Nursing and Intermediate Care Facilities," and the Clients' Personal Needs Funds in accordance with the "Uniform Accountability Procedures for Title XIX Patient Personal Needs Funds in Skilled Nursing and Intermediate Care Facilities."

Our audit of the financial records included verification of revenues and expenses through testing procedures which were deemed necessary in the circumstances.

BACKGROUND

Title 40.1-21-4 of the General Laws of the State of Rhode Island authorizes the Director of the Department of Mental Health, Retardation and Hospitals to be responsible for "planning and developing a complete, comprehensive and integrated statewide program for the developmentally disabled." Said programs may include but are not limited to: various type workshop activities, programs to alleviate and ameliorate developmental problems, physical activities, health consultation, and transportation problems.

The Greater Providence Chapter for Retarded Citizens, Inc., also known as the John E. Fogarty Center, is a private nonprofit corporation located at 220 Woonasquatucket Avenue, North Providence. It is one of eight regional chapters. The Center is governed by a board of directors consisting of fifteen members including five elected officers. The elected officers serve two-year terms and the members-at-large serve alternating two-year terms.

On June 30, 1996 the Scenic Hill, Roland Street, and Douglas Avenue Group Homes were converted from Intermediate Care Facilities for the Mentally Retarded (ICF/MR's) to Waiver Funded Residential Facilities for developmentally disabled citizens.



Department of Administration BUREAU OF AUDITS One Capitol Hill Providence, R.I. 02908-5889 TEL #: (401) 222-2768

FAX #: (401) 222-3973

Ms. Christine Ferguson, Director Department of Human Services 600 New London Avenue Cranston, RI 02920

Dear Ms. Ferguson:

We have performed the procedures enumerated below, which were agreed to by the Department of Human Services (DHS) and Greater Providence Chapter for Retarded Citizens, Inc. (provider), solely to assist the users in evaluating the provider's assertion about their compliance with DHS's <u>Principles of Reimbursement H.I.M.-15</u> to the service provider cost reports, Clients' Clothing Account Funds to DHS's <u>Principles for Skilled Nursing and Intermediate Care Facilities</u> and Clients' Personal Needs to DHS's <u>Procedures for Title XIX Patient Personal Needs Funds in Skilled Nursing and Intermediate Care Facilities</u> for the calendar year 1999. Further, to provide for greater and more timely coverage we have applied an agreed-upon strategic plan to calendar years 1994 through 1998 which allows us to review and adjust these prior year cost reports based on current year findings as well as other risk factors. For settlement purposes this report includes those cost reports based on that strategic plan. This agreed-upon procedure engagement was performed in accordance with standards established by the American Institute of Certified Public Accountants. The sufficiency of these procedures is solely the responsibility of the specified users of this report. Consequently, we make no representation regarding the sufficiency of the procedures described below either for the purpose for which this report has been requested or for any other purpose.

Based on the application of the procedures referred to above, we determined a final rate settlement for the ICF/MR's for the calendar years 1994 through 1999 with provisions of DHS's Principles of Reimbursement H.I.M.-15, and determined ending client fund balances for the calendar years 1994 through 1999 with provisions of DHS's Principles for Skilled Nursing and Intermediate Care Facilities, and Uniform Accountability Procedures for Title XIX Patient Personal Needs Funds in Skilled Nursing and Intermediate Care Facilities. These matters are discussed in the accompanying "Findings and Recommendations" section of this report.

We were not engaged to, and did not, perform an examination, the objective of which would be the expression of an opinion of assertion by the provider's management. Accordingly, we do not express such an opinion. Had we performed additional procedures, other matters might have come to our attention that would have been reported to you.

Ms. Christine Ferguson, Director Page 2

This report is intended solely for the use of DHS and the provider and should not be used by those who have not agreed to the procedures and taken responsibility for the sufficiency of the procedures for their purposes. However, this report is a matter of public record and its distribution is not limited.

Sincerely,

Stephen M. Cooper, CFE, CGFM

Chief, Bureau of Audits September 29, 2000

SMC:pb



Department of Administration BUREAU OF AUDITS One Capitol Hill Providence, R.I. 02908-5889 TEL #: (401) 222-2768

FAX #: (401) 222-2708

Ms. A. Kathryn Power, Director Department of Mental Health, Retardation and Hospitals 600 New London Avenue Cranston, RI 02920

Dear Ms. Power:

We have performed the procedures enumerated below, which were agreed to by the Department of Mental Health, Retardation and Hospitals (MHRH) and Greater Providence Chapter for Retarded Citizens Inc., (provider), solely to assist the users in evaluating the provider's assertion about their compliance to the financial terms and conditions contained within the Day Program Service for Developmentally Disabled Citizens contracts during the calendar year 1999. Further, to provide for greater and more timely coverage we have applied an agreed-upon strategic plan to calendar years 1994 through 1998 which allowed us to review and adjust these prior year cost reports based on current year findings as well as other risk factors. For settlement purposes this report includes those cost reports for calendar years 1994 through 1998 based on that strategic plan. This agreed-upon procedures engagement was performed in accordance with standards established by the American Institute of Certified Public Accountants. The sufficiency of these procedures is solely the responsibility of the specified users of this report. Consequently, we make no representation regarding the sufficiency of the procedures described below either for the purpose for which this report has been requested or for any other purpose.

For purposes of this engagement we made a determination as to the reasonableness of allowable costs based on the "prudent person rule," accuracy of reported activities and if any overall surplus funding was provided by MHRH.

Based on the application of the procedures referred to above, we became aware of an overall surplus by MHRH for the calendar year (s) 1994 through 1999, of \$8,922, of which \$4,092 is due to MHRH. This matter is discussed in the accompanying "Findings and Recommendations" section of this report.

We were not engaged to, and did not, perform an examination, the objective of which would be the expression of an opinion of assertion by the provider's management. Accordingly, we do not express such an opinion. Had we performed additional procedures, other matters might have come to our attention that would have been reported to you.

Ms. A. Kathryn Power, Director Page 2

This report is intended solely for the use of MHRH and the provider and should not be used by those who have not agreed to the procedures and taken responsibility for the sufficiency of the procedures for their purposes. However, this report is a matter of public record and its distribution is not limited.

Sincerely,

Stephen M. Cooper, CFE, CGFM

Chief, Bureau of Audits September 29, 2000

SMC:pb

GREATER PROVIDENCE CHAPTER FOR RETARDED CITIZENS, INC. (JOHN E FOGARTY CENTER) STATEMENT OF REVENUE AND EXPENSES - TOTAL CALENDAR YEAR 1999

Semi-Waiver Independent Conversion Gift Child Adult Day Waiver Resident Apartment Shop Care Agency **Program** Recreation Workshop Laundry Total **Administrative Program** Program **Program** Revenues State of Rhode Island 7.543.931 2,906,225 777,131 3,692,090 168,485 Department of MHRH 126,699 60,000 186,699 Other State Depts 381,698 Social Security Inc 381,698 Client Excess Earning 28,979 28,979 15,705 15,705 City of Town Support Interest Income 41 41 6,631 6.631 United Way 3,295 3,295 Restricted Donations 3.935 **Unrestrict Donations** 4.460 525 97,351 207,995 347,076 41,730 Program Service Fees 181,621 Workshop Contract Inc. 181,621 Other 198 347 855 37,358 2.944 16,458 1,711 12,981 1,864 PRB Income 48 84 207 9,037 712 3,981 414 3,140 451 Investment Incom 2,411 147 15,606 6,315 895 96 721 4 26,195 Miscellaneous Income 13,299 Store Gross Sale 13,299 ò 97,786 7,230 7,598 181,621 13,299 211,468 \$ 8,786,025 4,328 3,126,445 845,571 4,119,783 170,896 **Total Revenues** Expenses 47,228 116,586 2,240,815 232,706 2,057,345 253,984 26,928 215,362 4,633 Wages \$ 5,596,372 400,785 38,203 4,310 2,633 18,621 808,064 64,075 362,783 37,256 280,183 Health Insurance 1,389 1,389 Other Fringes Occup. Therapist 965 165 800 9,630 9,630 Speech Therapist 2.930 131 8,376 200 **Psychologist** 11,637 26 6 10 64,636 61.629 1,106 52 1,751 56 Other 1,714 207 49 47 15,709 12,744 948 Office Supplies 23 333 793 39,492 5,731 24,340 57 6.894 397 924 Telephone 2,883 1,487 124,254 728 72,732 11,311 35,113 Travel - Motor Vehicle 608 12,059 80 Travel - Employees 22,717 1,146 7,300 1,524 2,405 2,374 145 5,522 598 Conventions, Meetings 20 4,409 40 720 Adv. - Help Wanted 5.189 390 8,934 Organizational Dues 39,990 30,666 Computerized Payroll 29 & Data Processing 11,437 11,436 (28)18.055 18.055 Accounting & Auditing 22,008 Legal Services 22,008 3,589 8,763 Payroll Taxes 422,816 28,781 179,713 17,553 161,877 20,498 1,688 354 116,289 43,674 4,548 34,504 4,955 526 11,111 74 923 2,274 13,700 Insurance Clothing Allowance -19,160 19,160 Clients 1,315 393 8,486 6,850 986 9,565 142,669 21,293 40,140 587 53,054 Miscellaneous HCPA - Provider Tax 242,879 242,879 Real Estate -517 Personal Prop. Tax 517

GREATER PROVIDENCE CHAPTER FOR RETARDED CITIZENS, INC. (JOHN E FOGARTY CENTER) STATEMENT OF REVENUE AND EXPENSES - TOTAL CALENDAR YEAR 1999

Revenues	Total	Administrative	Adult Day <u>Program</u>	Conversion Waiver Program	Waiver Resident Program	Semi- Independent Apartment <u>Program</u>	Recreation	Workshop	Gift Shop	Laundry	Child <u>Care</u>	Agency
Expenses - Cont'd									3			
Interest	35,663	3,207	11,291	6,287	11,650	1,275	139	-	-	245	584	985
Rent/Lease of Building	49,602	7,205	3,599	2,340	21,602	-	-	-	-	14,856	-	-
Lease of Equipment	25,640	15,658	8,006	83	1,491	-	30	_	_	-	372	-
Lease of Vehicles	22,650	-	-	-	22,650	-	_	-	-	-	-	_
Amortization of Leasehold					•							
Impr.	13,662	-	-	-	-	-	-	-	48	13,614	-	_
Building Depreciation	11,376	-	11,216	-	-	-	-	-	-	-	160	_
Equipment Depr.	10,157	6,707	930	-	270	-	-	_	-	736	1,514	_
Motor Vehicle Depr.	49,847	5,643	29,980	3,354	10,870	_	_	-	_	-	-	_
Fuel	21,609	<u>-</u> ′	13,213	-	8,396	-	_	_		_	_	-
Gas	25,823	2,247	5,768	82	2,632	-	561		-	12,771	1,762	_
Electricity	63,638	3,250	25,492	434	24,264	_	538	-	-	6,479	3,181	_
Water & Sewerage	25,094	107	5,407		11,464	-	29	_	-	7,374	713	_
Plant Supplies	40,810	169	24,080	-	16,516	_	45	_	_	.,		_
Purchased Services					,-,-,-							
& Repairs	156,785	5,648	63,271	71,290	9,343	125	510	_	-	3,805	2,793	_
Food & Kitchen Suppl.	152,567	•	11,826	-	140,741	-		-		-	-,,,,,,	_
Linen, Laundry Suppl.												
& Service	6,184		-	-	1,920	-		-	-	4,264	_	_
Housekeeping Supplies	18,729	346	4,285	-	14,001	-	97	-		- 1,201	_	_
Pharmacy Supplies	28,396	. 50	7,124	5,068	16,089	65	-	_	-		_	_
Classroom Supplies	1,403	-	-	-	-		-	-	-	-	1,403	-
Workshop Client P/R	,										.,	
Taxes	16,465		_	-	-	-		16,465	-	_	-	_
Transportation	261,308	-	261,308	-				-				
Subtotal	8,778,804	745,721	3,480,248	405,247	3,229,231	323,662	37,684	242,938	13,957	126,949	162,265	10,902
Allocation of Administrative Expenses	\$ -	(745,721)	334,903	34,887	308,683	37,964	4,034	-	672	7,097	17,481	_
			-									
Total Expenses	\$ 8,778,804		3,815,151	440,134	3,537,914	361,626	41,718	242,938	14,629	134,046	179,746	10,902
Net Excess (Deficiency) of	£ 7.00:	4.000	(000 705)	105 105	5 0.4.00-		40.400					
Revenue Over Expenses	\$7,221_	4,328	(688,706)	405,437	581,869	(190,730)	(34,120)	(61,317)	(1,330)	(36,260)	31,722	(3,672)

See accompanying notes to financial information.

		Total			Special	
		Adult Day	Adult	Adult	Adult	Behavior
<u>Revenues</u>		<u>Programs</u>	<u>Habilitation</u>	<u>Development</u>	<u>Development</u>	<u>Skills</u>
State of Rhode Island						
Dept. of MHRH						
DHS Rehab. Option	\$	2,906,225	959,596	1,033,700	260,664	652,265
Other State Depts.		126,699	125,403	1,151	145	-
City or Town Support		15,705	6,731	5,982	1,496	1496
Interest Income		41	41	-	-	-
Program Service Fees		41,730	41,730	=	-	-
Other						
Investment Income		3,981	1,561	1,059	648	713
Miscellaneous Income		15,606	15,415	110	42	39
Store Gross Sales		16,458	6,451	4,379	2,680	2,948
Total Revenues	\$	3,126,445	1,156,928	1,046,381_	265,675	657,461
-						
<u>Expenses</u>	•	0.040.045	070 504	500.047	204.075	101 000
Wages	\$	2,240,815	878,531	596,217	364,675	401,392
Health Insurance		362,783	146,992	93,431	58,258	64,102
Occupational Therapist		165	165	- 2.040	- 2.040	-
Speech Therapist		9,630	3,210	3,210	3,210	-
Psychologist		2,930	682	683	683	882
Other		1,106	804	132	81	89
Office Supplies		948	928	20	4 000	- 047
Telephone		24,340	17,519	4,705	1,899	217
Travel - Motor Vehicle		72,732	41,503	19,690	2,171	9,368
Travel - Employees		7,300	3,960	2,139	268	933
Conventions, Meetings		2,405	1,344	665	69	327
Adv Help Wanted		4,409	2,575	1,148	120	566
Organizational Dues		390	390	-	-	-
Computerized Payroll &		(00)	(00)	(0)		
Data Processing		(28)	(26)	(2)	- 07.050	-
Payroll Taxes		179,713	70,928	50,448	27,652	30,685
Insurance		43,674	17,080	11,636	7,122	7,836

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GREATER PROVIDENCE CHAPTER FOR RETARDED CITIZENS, INC. (JOHN E. FOGARTY CENTER) STATEMENT OF REVENUES AND EXPENSES - ADULT DAY PROGRAMS CALENDAR YEAR 1999

	Total			Special	5
	Adult Day	Adult	Adult	Adult	Behavior
<u>Revenues</u>	<u>Programs</u>	<u>Habilitation</u>	<u>Development</u>	<u>Development</u>	<u>Skills</u>
Expenses - (Cont'd)					
Miscellaneous	40,140	30,984	4,335	3,950	871
Interest	11,291	4,406	3,021	1,842	2,022
Rent /Lease of Building	3,599	3,336	234	29	-
Lease of Equipment	8,006	7,183	557	198	68
Building Depreciation	11,216	3,812	2,468	2,468	2,468
Equipment Depreciation	930	614	158	74	84
Motor Vehicle Depr.	29,980	7,495	7,495	7,495	7,495
Fuel	13,213	6,121	4,904	2,188	-
Gas	5,768	4,204	1,049	335	180
Electricity	25,492	16,101	6,494	2,594	303
Water & Sewerage	5,407	4,446	648	223	90
Plant Supplies	24,080	23,361	492	208	19
Purchased Services &					
Repairs	63,271	46,507	11,437	4,137	1,190
Food & Kitchen Supplies	11,826	11,779	42	5	-
Housekeeping Supplies	4,285	2,979	903	403	-
Pharmacy Supplies	7,124	7,124	-	-	-
Transportation	261,308	188,573	45,796	5,388	21,551
Subtotal	3,480,248	1,555,610	874,155	497,745	552,738
Allocation of Administrative					
Expenses	334,903	131,313	89,099	54,492	59,999
Total Expenses	\$ 3,815,151	1,686,923	963,254	552,237	612,737

See accompanying notes to financial information.

	Total Waiver				
	Program			HILLCR	
Revenues	Combined	State	Client	State	Client
State of Rhode Island					
Department of MHRH	\$ 3,692,090	3,692,090	-	639,157	-
Social Security Income	381,698	-	381,698	-	58,135
Client Excess Earnings	28,979	28,979	-	49	-
Other					
PRB Income	12,981	12,980	-	1,532	-
Investment Income	3,140	3,141	-	371	-
Miscellaneous Income	895	895	-	65	
Total Revenues	\$ 4,119,783	3,738,085	381,698	641,174	58,135
Expenses					
Wages	2,057,345	2,057,345	-	234,934	-
Health Insurance	280,183	280,183	-	34,178	_
Occupational Therapist	800	800	-	•	-
Psychologist	8,376	8,376	-	507	-
Other	1,751	1,751	-	152	-
Office Supplies	47	47	-	4	-
Telephone	6,894	6,894	-	1,566	-
Travel - Motor Vehicle	35,113	35,113	-	3,665	-
Travel - Employees	1,524	1,524	-	135	-
Conventions, Meetings	2,374	2,374	-	206	-
Organizational Dues	8,934	8,934	-	812	-
Payroll Taxes	161,877	161,877	-	17,689	-
Insurance	34,504	34,504	-	4,071	-
Clothing Allowance -					
Clients	19,160	-	19,160	-	3,285
Miscellaneous	53,054	19,891	33,163	2,015	5,327
HCPA-Provider Tax	242,879	242,879	-	41,524	-
Real Estate -					
Personal Prop. Taxes	517	-	517	-	-
Interest	11,650	11,650	-	1,052	-
Rent/Lease of Building	21,602	-	21,602	-	16,958
Lease of Equipment	1,491	1,491	-	346	-
Lease of Vehicles	22,650	22,650	-	7,548	-
Equipment Depreciation	270	270	-	270	-
Motor Vehicle Depr.	10,870	10,870	-	132	-

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GREATER PROVIDENCE CHAPTER FOR RETARDED CITIZENS, INC. (JOHN E. FOGARTY CENTER) STATEMENT OF REVENUES AND EXPENSES - RESIDENTIAL WAIVER PROGRAM CALENDAR YEAR 1999

	Total Waiver Program			HILLC	REST
Revenues	Combined	State	Client	State	Client
Expenses - (Cont'd)					
Fuel	8,396	-	8,396	-	-
Gas	2,632	-	2,632	-	7
Electricity	24,264	-	24,264	-	39
Water & Sewerage	11,464	-	11,464	-	-
Plant Supplies	16,516	-	16,516	-	1,457
Purchased Services					
& Repairs	9,343	9,343	-	90	-
Food & Kitchen Supplies	140,741	-	140,741	-	26,775
Linen, Laundry Supplies					
& Service	1,920	-	1,920	-	1,920
Housekeeping Supplies	14,001	-	14,001	-	1,791
Pharmacy Supplies	16,089	-	16,089	-	2,435
• • • • •	0.000.004	0.040.700	040 405	250 806	50.004
Subtotal	3,229,231	2,918,766	310,465	350,896	59,994
Allocation of Administrative	200.002	200.002		20.000	
Expenses	308,683	308,683		30,868	-
Total Expenses	\$ 3,537,914	3,227,449	310,465	381,764	59,994
·					
Excess (Deficiency of					
Revenues over Expense	581,869	510,636	71,233	259,410	(1,859)

See accompanying notes to financial statements.

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		BURATTI		HOW	ARD	ANGELL		
Revenues		State	Client	State	Client	State	Client	
State of Rhode Island						-		
Department of MHRH	\$	425,331		286,254		286,470		
Social Security Income			42,053		27,424		29,273	
Other								
PRB Income		1,259	-	926	-	1,001	-	
Inventstment Income		305	-	224	-	242	-	
Miscellaneous Income		61		57	-	58_	-	
Total Revenues	\$	426,956	42,053	287,461	27,424	287,771	29,273	
Expenses								
Wages	\$	197,702	_	152,608	-	162,583	-	
Health Insurance	•	27,229	-	19,979	-	21,606	-	
Occupational Therapist		-	-	-	_	-	-	
Psychologist		496	_	1,116	-	1,113	-	
Other		143	-	233	-	136	-	
Office Supplies	,	4	-	4	_	4	-	
Telephone		525	_	612	-	705	-	
Travel-Motor Vehicle		4,373	-	5,199	-	3,051	-	
Travel-Employees		150	-	150	-	74	-	
Conventions, Meetings		206	-	206	-	206	-	
Organizational Dues		812	-	812	-	812	-	
Payroll Taxes		15,928	-	11,577	-	12,278	-	
Insurance		3,346	· _	2,462	-	2,661	-	
Clothing Allowance-		•						
Clients		-	2,010	-	1,460	-	1,460	
Miscellaneous		1,781	3,261	1,626	2,605	2,193	1,980	
HCPA-Provider Tax		27,772	-	18,610	-	18,781	-	
Interest		868	-	634	-	687	-	
Rent/Lease of Building		-	1,472	-	1,472	-	212	
Lease of Equipment		229	-	123	-	86	-	
Lease of Vehicles		736	-	6,660	-	-	-	
Motor Vehicle Depr.		132	-	1,332	-	132	-	

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	BURATTI			HOWARD				ANGELL			
Revenues	State		Client		State		Client	_	State		Client
Expenses - (Cont'd)	-			_	_			_			
Fuel	-		-		-		920		-		1,729
Gas	-		51		-		380		~		7
Electricity	-		5,400		-		2,992		-		1,554
Water & Sewerage	-		970		-		3,888		-		929
Plant Supplies	-		1,457		-		1,527		-		1,522
Purchased Services											
& Repairs	1,786		-		533		-		724		-
Food & Kitchen Supplies	-		15,671		-		10,007		-		10,652
Housekeeping Supplies	-		1,481		-		1,459		-		859
Pharmacy Supplies			1,384_	_			1,342	-	-		1,436
Subtotal Allocation of Administrative	\$ 284,218		33,157		224,476		28,052		227,832		22,340
Expenses	30,868			_	24,694			-	24,695		
Total Expenses	\$ 315,086		33,157	_	249,170		28,052	-	252,527		22,340
Excess (Deficiency) of Revenues over Expenses	\$ 111,870		8,896	=	38,291		(628)	=	35,244	:	6,933

		Scer	nic Hill	Tall	у Но	Ridge		
<u>Revenues</u>		State	Client	State	Client	State	Client	
State of Rhode Island								
Department of MHRH	\$	327,856	-	283,172	-	278,407	-	
Social Security Income		_	36,718	-	31,365	-	24603	
Clients Excess Earnings		6,347	-	3,298	-	14,847	-	
Other								
PRB Income		1,838	-	840	-	855	-	
Investment Income		445	-	203	-	207	-	
Miscellaneous Income		69		56_		56		
Total Revenues	\$	336,555	36,718	287,569	31,365	294,372	24,603	
Expenses								
Wages	\$	276,698	-	140,600	-	142,736	-	
Health Insurance		39,820	-	17,596	-	18,434	-	
Occupational Therapist		800	-	-	-	-	-	
Psychologist		496	-	864	-	496	-	
Other		261	-	131	-	131	-	
Office Supplies		4	-	4	-	4	-	
Telephone		536	-	484	-	473	-	
Travel-Motor Vehicle		3,030	-	2,042	-	4,061	-	
Travel-Employees		74	-	74	-	318	-	
Conventions, Meetings		206	-	206	-	206	-	
Organizational Dues		812	-	812	-	812	-	
Payroll Taxes		22,930	-	10,634	-	14,142	-	
Insurance		4,885	-	2,234	-	2,274	-	
Clothing Allowance -								
Clients		-	1,820	-	1,460	-	1,460	
Miscellaneous		1,793	3,613	1,938	2,683	2,251	3,237	
HCPA-Provider Tax		22,694	-	18,682	-	18,035	-	

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GREATER PROVIDENCE CHAPTER FOR RETARDED CITIZENS, INC. (JOHN E. FOGARTY CENTER) STATEMENT OF REVENUES AND EXPENSES - RESIDENTIAL WAIVER PROGRAM CALENDAR YEAR 1999

		Scenic Hill		Tally	Но	Ridge		
Revenues		State	Client	State	Client	State	Client	
Expenses - (Cont'd)								
Interest		2,503	-	574	-	584	-	
Rent/Lease of Building		-	212	-	212	-	212	
Lease of Equipment		421	-	52	-	8	-	
Lease of Vehicles		-	-	7,706	-	-	-	
Motor Vehicle Depr.		132	-	1,532	-	132	-	
Fuel		-	1,445	-	1,074	-	1,186	
Gas		-	7	-	252	-	7	
Electricity		-	3,229	-	2,626	-	2,489	
Water & Sewerage		-	-	-	502	-	432	
Plant Supplies		-	1,457	-	1,457	-	1,602	
Purchased Services								
& Repairs		1,149	-	720	-	937	-	
Food & Kitchen Supplies		-	12,768	-	10,614	-	10,337	
Housekeeping Supplies	,	-	1,499	-	944	-	1,204	
Pharmacy Supplies			1,342	_	1,342		1,342_	
Subtotal Allocation of Administrative	\$	379,244	27,392	206,885	23,166	206,034	23,508	
Expenses		40,129		21,608		21,608		
Total Expenses	\$	419,373	27,392	228,493	23,166	227,642	23,508	
Excess (Deficiency) of Revenues Over Expenses	\$	(82,818)	9,326	59,076	8,199	66,730	1,095	

See accompanying notes to financial information.

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		Roland		Sherv	vood
		State	Client	State	Client
Revenues	-				
State of Rhode Island					
Department of MHRH	\$	397,289	-	284,169	-
Social Security Income		-	50,438	-	30,838
Clients Excess Earnings		-	-	1,313	-
Other					
PRB Income		1,763	-	900	-
Investment Income		427	-	218	-
Miscellaneous Income	-	118		57	
Total Revenues	\$_	399,597	50,438	286,657	30,838
F					
Expenses	œ	200 470		440.027	
Wages	\$	266,478	-	149,037	-
Health Insurance		37,336	-	19,410 496	-
Psychologist		1,063	-		-
Other Office Supplies		159 4	-	133 4	-
Telephone		406	-	488	-
Travel-Motor Vehicle		1,679	<u>-</u>	2,580	_
Travel-Employees		318	-	2,360 74	-
Conventions, Meetings		206	-	206	-
Organizational Dues		812	-	812	-
Payroll Taxes		20,118	-	11,311	-
Insurance		4,687	-	2,393	-
Clothing Allowance-		4,007	-	2,393	-
Clients			2,190		1,460
Miscellaneous		- 1,875	3,632	- 1,261	2,565
HCPA-Provider Tax		26,645	5,032	18,685	2,303
Interest		2,699	-	631	-
Rent/Lease of Building		2,099	212	031	212
Lease of Equipment		205	212	- 8	212
• •		4,790	•	1,032	-
Motor Vehicle Depr. Fuel		4,790	1,392	1,032	650
Gas		-	7	-	381
Electricity		-	1,903	-	1,123
•		-	985	-	
Water & Sewerage		-	900	-	-

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GREATER PROVIDENCE CHAPTER FOR RETARDED CITIZENS, INC. (JOHN E. FOGARTY CENTER) STATEMENT OF REVENUES AND EXPENSES - RESIDENTIAL WAIVER PROGRAM CALENDAR YEAR 1999

	Roland		Sherwood	
	State	Client	State	Client
Expenses - (Cont'd) Plant Supplies		1,537		1,457
Purchased Services & Repairs	1,321	-	297	
Food & Kitchen Supplies	-	15,755	-	10,330
Housekeeping Supplies	-	1,194	-	1,193
Pharmacy Supplies		1,421_	-	1,342
Subtotal Allocation of Administrative Expenses	\$ 370,801	30,228	208,858	20,713
	40,129		21,608	
Total Expenses Excess (Deficiency) of Revenues over Expenses	\$_410,930_	30,228	230,466	20,713
	\$ <u>(11,333)</u>	20,210	56,191	10,125

See accompanying notes to financial information.

		D	ouglas	Lea	ch
		State	Client	State	Client
Revenues	_				
State of Rhode Island					
Department of MHRH	\$	284,946	-	199,039	-
Social Security Income			30,025		20,826
Clients Excess Earnings		1,525		1,600	
Other					
PRB Income		1,345	-	721	-
Investment Income		325	-	174	-
Miscellaneous Income	_	243	-	55	-
Total Revenues	\$_	288,384	30,025	201,589	20,826
Expenses					
Wages	\$	209,588	-	124,381	_
Health Insurance	•	29,086	-	15,507	-
Psychologist		1,231	-	496	-
Other		146	-	127	-
Office Supplies		4	-	4	-
Telephone		552	-	546	-
Travel-Motor Vehicle		2,702	-	2,731	-
Travel-Employees		74	-	83	-
Conventions, Meetings		206	-	314	-
Organizational Dues		812	-	812	-
Payroll Taxes		15,917	-	9,353	-
Insurance		3,575	-	1,916	-
Clothing Allowance -					
Clients		-	1,460	-	1,095
Miscellaneous		1,314	2,669	1,843	1,591
HCPA-Provider Tax		18,617	-	12,836	-
Real Estate -					
Personal Prop. Taxes		-	-	-	517
Interest		920	-	498	-
Rent/Lease of Building		-	212	-	212
Lease of Equipment		8	-	8	-

GREATER PROVIDENCE CHAPTER FOR RETARDED CITIZENS, INC. (JOHN E. FOGARTY CENTER) STATEMENT OF REVENUES AND EXPENSES - RESIDENTIAL WAIVER PROGRAM CALENDAR YEAR 1999

	Douglas		Leach				
	_	State	Client		State		Client
Expenses - (Cont'd)	_						-
Motor Vehicle Depr.		132	-		1,392		-
Gas		-	1,066		-		464
Electricity		-	1,733		-		1,176
Water & Sewerage		-	865		-		2,895
Plant Supplies		-	1,589		-		1,457
Purchased Services							
& Repairs		772	-		1,013		-
Food & Kitchen Supplies		-	10,344		-		7,488
Housekeeping Supplies		-	1,192		-		1,185
Pharmacy Supplies	_		1,362				1,342
			-	·		_	
Subtotal	\$	285,656	22,492		173,860		19,422
Allocation of Administrative							
Expenses	_	30,868			21,608		-
Total Expenses	\$_	316,524	22,492		195,468	_	19,422
Excess (Deficiency) of							
Revenues over Expenses	\$_	(28,140)	7,533		6,121		1,404

See accompanying notes to financial information.

NOTES TO FINANCIAL INFORMATION

Note 1 – Significant Accounting Policies

Basis of Accounting

The financial statements are presented on the accrual basis of accounting which is in compliance with MHRH's "Prudent Person Rule" and DHS's <u>Principles of Reimbursement HIM-15</u>. Under this basis, revenues are recognized in the accounting period in which they are earned and expenses are recognized in the period incurred.

Depreciation

Depreciation costs are based on the straight-line method which is in compliance with MHRH's "Prudent Person Rule" and DHS's <u>Principles of Reimbursement HIM-15.</u>

Note 2 – Excess (Deficiency) of Revenue Over Expenses

The State's method of reimbursement for ICF/MR facilities is based solely on audited expenses and, therefore, does not take into account the excess or deficiency of revenue over expenses.

FINDINGS AND RECOMMENDATIONS

Status of Prior Audit Recommendations Calendar Years 1988 – 1993

Recommendation for DHS

1. The amount of \$4,734.04 should be recovered from the Greater Providence Chapter-Rhode Island Association for Retarded Citizens, Inc., by the Department of Human Services in accordance with its current funding policy.

Complied.

Recommendation for MHRH

2. The amount of \$19,829 should be recovered from the Greater Providence Chapter-Rhode Island Association for Retarded Citizens, Inc. by the Department of MHRH as excess funding in 1991 or reprogrammed by the provider upon written agreement with MHRH in accordance with the applicable contract provisions.

Complied.

CURRENT YEAR FINDINGS AND RECOMMENDATIONS

DHS Programs

Amount Due To DHS

As a result of our examination, it has been determined that a net amount of \$24,642 is due to the Department of Human Services from the Greater Providence Chapter for Retarded Citizens, Inc., due to excess per diem rates for calendar years 1996 through 1994.

This settlement summarized by facility and year, is as follows:

FACILITY

PER DIEM RATE	<u>Total</u>	<u>1996</u>	1995	<u>1994</u>
Scenic Hill	\$ 8,157	1,761	2,114	4,282
Roland	8,987	2,285	2,370	4,332
Douglas	7,498	1,681	1,921	3,896
Total Due to DHS	\$ 24,642	5,727	6,405	12,510

Recommendation

1. The amount of \$24,642 should be recovered from the Greater Providence Chapter for Retarded Citizens, Inc., by the Department of Human Services in accordance with its current funding policy.

MHRH Programs

Determination of Excess Funding

The Department of MHRH and the providers have agreed "that in each particular contract year, any surplus incurred by the Provider in operating one or more of its programs, wherein funding for same is received by the Department of Mental Health, Retardation and Hospitals and/or the Department of Human Services, shall be used/can be used by the Provider to offset any losses incurred by the Provider in one or more of the programs above-referred." Any net surplus by each particular contract year incurred by the Provider "shall be returned to the State of Rhode Island in such manner as it may prescribe, or shall be used by the Provider in a manner which has been approved by written agreement with the State of Rhode Island." This policy is applicable to all MHRH contracts beginning with calendar year 1986.

As a result of our audit it has been determined that there are excess funds in the amount of \$8,922 upon the aforementioned policy and the individual contract requirements. The following is a summary of the individual program excesses or deficits and combined results for each year.

	Net Excess	Day Program	Conversion Wavier	Waiver Program	<u>Semi-</u> Independent
1997	\$ 8,922	(149,237)		<u>115,484</u>	<u>42,675</u>
Total	\$ 8,922	(149,237)	-	<u>115,484</u>	<u>42,675</u>
	Net Deficits	Day Program	Conversion Waiver	Waiver Program	<u>Semi-</u>
			1101101		<u>Independent</u>
1999 1998 1996 1995 1994	\$ (141,749) (218,784) (456,299) (438,545) (563,270)	(688,706) (477,795) (553,667) (250,585) (563,270)	405,437 107,592 - - -	332,250 165,309 107,500 - -	(190,730) (13,890) (10,132) (187,960)

An effort through your department's Division of Developmental Disabilities to finalize all prior years' outstanding excess funding against additional program endeavors by the Greater Providence Chapter for Retarded Citizens, Inc. (Center), has produced a net excess balance still due to the Center of \$4,830. This amount should be applied against the current net excess of \$8,922, leaving a net settlement due to MHRH of \$4,092.

Recommendation

 The amount of \$4,092 should be recovered from the Greater Providence Chapter for Retarded Citizens, Inc., by the Department of MHRH as excess funding or be reprogrammed by the provider upon written agreement with MHRH in accordance with the applicable contract provisions and policy.

Details pertaining to this settlement by program are as follows:

Day Programs

The contract for the fiscal year ended June 30, 1999 states that "if the audit or calendar year cost report reveals that the total combined amounts of the payment under this Agreement is greater than the total combined reasonable allowable cost for the above specified program, the parties agree to recognize that the excess funding is that of other income over and above the Department funding at the discretion of the Department. However, should the excess funding be greater than other income, the Provider agrees to reimburse to the Department the difference of excess funding." Similar provisions were also in the contracts that covered the years 1994-1998.

There was no excess funding for the period under review.

Waiver Residential Program

The Wavier contract for the fiscal year ended June 30, 1999 stated that "if the audit or calendar year cost report reveals total payment to the Provider under the Agreement is greater than one hundred five (105%) percent of total allowable cost for the above specified programs covered by this agreement the parties agree that the excess funding over one hundred five (105%) percent will be returned to the Department by the Provider." This provision was also in the contracts for 1994 through 1998.

Period	Total MHRH Payments to Provider	105% of Allowable Expenses	Net Excess Funding
1999	\$ 3,721,069	3,388,819	332,250
Prior Years			
1998 1997 1996 1995 1994	3,536,301 3,481,863 2,586,315 1,966,313 1,941,365	3,370,992 3,366,379 2,478,815 2,023,619 2,001,021	165,309 115,484 107,500 -

Semi-Independent Living Program

The contract for the fiscal year ended June 30, 1999 states that "The parties to this contract agree that in each particular contract year, any surplus incurred by the Provider in operating one or more of its programs, wherein funding for same is received by the Department of Mental Health, Retardation and Hospitals and/or the Department of Human Services, shall be used/can be used by the Provider to offset any losses incurred by the Provider in one or more of the programs above-referred. In each particular contract year, where a Provider has an overall surplus, after application of all the above-referred program surplus/loss offset, this surplus shall be due and owing to the State of Rhode Island and either shall be returned to the State of Rhode Island in such manner as it may prescribe, or shall be used by the Provider in a manner which has been approved by written agreement with the State of Rhode Island." This contract provision is retroactive back to 1994.

We have determined that excess funding by the Department of Mental Health, Retardation and Hospitals of Greater Providence Chapter for Retarded Citizens, Inc., for the Period under review totaled \$42,675 in 1997. For the years, 1999, 1998, and 1996, the program operated with deficiencies of revenue over expenses and for 1994 the program excess was from non-mhrh sources. The excess is summarized as follows:

		<u>Excess</u>	
	Total Excess	Attributable to	Net Excess
<u>Year</u>	Funding	Non-MHRH Sources	Funding
1997	\$ 51,191	8,516	42,675
1994	9,360	110,566	-